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Kevin G. Rooney, Reg. No. 36,330

12/9/05
Date

PATENT

Applicants: Edwin J. Hlavka et al.
Ser. No.: 10/623,182
Filed: July 18, 2003
Group Art No.: 3736
Examiner: Unknown
For: METHOD AND APPARATUS FOR PERFORMING CATHETER-BASED ANNULOPLASTY USING LOCAL PLICATIONS
Confirmation No.: 2680
Atty Ref.: MICO-06B

Cincinnati, Ohio 45202

December 9, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.
2. X Small Entity status is claimed.
 Other than a Small Entity.

12/13/2005 MBIZUNES 00000083 10623182

01 FC:2251

60.00 0P

3. The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		LARGE ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For		Extra	Present Rate	Fee	Present Rate	Fee
TOTAL	14	MINUS	36	= 0	x \$25	\$0	x \$50	\$0
INDEP.	4	MINUS	7	= 0	x \$100	\$0	x \$200	\$0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+\$135	\$0	+\$270	\$0
TOTALS					TOTAL FEE	\$	TOTAL FEE	\$0

- ☆ If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 ☆☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid for" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

 X No additional fee for claims is required.

4. Attached is a check in the sum of \$_____.

_____ Please charge my Deposit Account No. 23-3000 in the amount of \$0. A duplicate copy of this sheet is attached.

5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Complete (a) or (b) as applicable.

(a) X Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
<u>X</u>	one month	\$ 120.00	\$ 60.00
—	two months	\$ 450.00	\$225.00
—	three months	\$1,020.00	\$510.00
—	four months	\$1,590.00	\$795.00
—	five months	\$2,160.00	\$1,080.00

X Attached is a check in the amount of \$ 60.00 for the one month extension fee as required by 37 C.F.R. § 1.17(c)

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

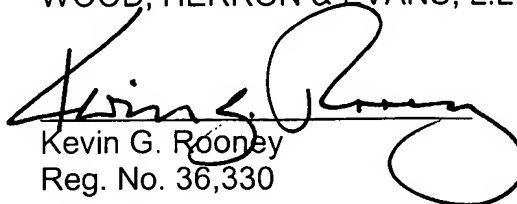
— An extension for _____ months has already been secured and the fee paid thereof of \$_____ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$_____.

OR

(b) — Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

XX If any additional fee for claims or extension of time is required, charge Account No. 23-3000. A duplicate of this transmittal is attached.

Respectfully submitted,
WOOD, HERRON & EVANS, L.L.P.


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